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6 **UNITED STATES DISTRICT COURT**  
7 **DISTRICT OF NEVADA**

8 ALLSTATE INSURANCE COMPANY, ) Case #2:15-CV-01786-APG-DJA  
9 ALLSTATE PROPERTY & CASUALTY )  
10 INSURANCE COMPANY, et al. )  
11 Plaintiff(s), )  
12 vs. )  
13 RUSSELL J. SHAH, MD., DIPTI R. SHAH, )  
14 et al., )  
15 Defendant(s). )  
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**VERIFIED PETITION FOR  
PERMISSION TO PRACTICE  
IN THIS CASE ONLY BY  
ATTORNEY NOT ADMITTED  
TO THE BAR OF THIS COURT  
AND DESIGNATION OF  
LOCAL COUNSEL**

FILING FEE IS \$250.00

16 \_\_\_\_\_, Petitioner, respectfully represents to the Court:  
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Emma Ruth Reyes  
(name of petitioner)

1. That Petitioner is an attorney at law and a member of the law firm of  
18 McCormick, Barstow, Sheppard, Wayte & Carruth LLP  
19 \_\_\_\_\_  
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McCormick, Barstow, Sheppard, Wayte & Carruth LLP  
(firm name)

with offices at \_\_\_\_\_ 7647 North Fresno Street \_\_\_\_\_,  
(street address)

Fresno \_\_\_\_\_, California \_\_\_\_\_, 93720 \_\_\_\_\_,  
(city) (state) (zip code)

559-433-1300 \_\_\_\_\_, emma.reyes@mccormickbarstow.com \_\_\_\_\_.  
(area code + telephone number) (Email address)

2. That Petitioner has been retained personally or as a member of the law firm by  
25 ALLSTATE INSURANCE COMPANY, et al. to provide legal representation in connection with  
26 [client(s)]

27 the above-entitled case now pending before this Court.

3. That since November 15, 2024, Petitioner has been and presently is a member in good standing of the bar of the highest Court of the State of California where Petitioner regularly practices law. Petitioner shall attach a certificate from the state bar or from the clerk of the supreme court or highest admitting court of each state, territory, or insular possession of the United States in which the applicant has been admitted to practice law certifying the applicant's membership therein is in good standing.

4. That Petitioner was admitted to practice before the following United States District Courts, United States Circuit Courts of Appeal, the Supreme Court of the United States and Courts of other States on the dates indicated for each, and that Petitioner is presently a member in good standing of the bars of said Courts.

5. That there are or have been no disciplinary proceedings instituted against petitioner, nor any suspension of any license, certificate or privilege to appear before any judicial, regulatory or administrative body, or any resignation or termination in order to avoid disciplinary or disbarment proceedings, except as described in detail below:

None

6. That Petitioner has never been denied admission to the State Bar of Nevada. (Give particulars if ever denied admission):

None.

7. That Petitioner is a member of good standing in the following Bar Associations.

## California State Bar Association.

8. Petitioner has filed application(s) to appear as counsel under Local Rule IA 11-2  
(LR IA 10-2) during the past three (3) years in the following matters: (State "none" if no applications.)

Date of Application	Cause	Title of Court Administrative Body or Arbitrator	Was Application Granted or Denied
None.	None.	None.	

(If necessary, please attach a statement of additional applications)

9. Petitioner consents to the jurisdiction of the courts and disciplinary boards of the State of Nevada with respect to the law of this state governing the conduct of attorneys to the same extent as a member of the State Bar of Nevada.

10. Petitioner agrees to comply with the standards of professional conduct required of the members of the bar of this court.

11. Petitioner has disclosed in writing to the client that the applicant is not admitted to practice in this jurisdiction and that the client has consented to such representation.

STATE OF California )  
COUNTY OF FRESNO )

LY.  
  
Petitioner

Petitioner's signature

Emma Reyes , Petitioner, being first duly sworn, deposes and says:

That the foregoing statements are true.

 Esther  
Petition

Petitioner's signature

Subscribed and sworn to before me this

\_\_\_\_ day of ~~place~~ ~~date~~ , \_\_\_\_\_

Notary Public or Clerk of Court

**DESIGNATION OF RESIDENT ATTORNEY ADMITTED TO  
THE BAR OF THIS COURT AND CONSENT THERETO.**

Pursuant to the requirements of the Local Rules of Practice for this Court, the Petitioner believes it to be in the best interests of the client(s) to designate Jonathan Carlson,  
(name of local counsel) Attorney at Law, member of the State of Nevada and previously admitted to practice before the above-entitled Court as associate resident counsel in this action. The address and email address of said designated Nevada counsel is:

7160 Rafael Way, Suite 320

Las Vegas  
(city)

Nevada  
(state)

89113  
(zip code)

702-949-1100, [Jonathan.Carlson@mccormickbarstow.com](mailto:Jonathan.Carlson@mccormickbarstow.com).  
(area code + telephone number) (Email address)

1 By this designation the petitioner and undersigned party(ies) agree that this designation constitutes  
2 agreement and authorization for the designated resident admitted counsel to sign stipulations  
3 binding on all of us.

4

5 **APPOINTMENT OF DESIGNATED RESIDENT NEVADA COUNSEL**

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7 The undersigned party(ies) appoint(s) Jonathan Carlson as  
8 (name of local counsel)  
his/her/their Designated Resident Nevada Counsel in this case.

9

10   
(party's signature)

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12 Karyn Pensa, Plaintiffs, SIU Analyst Lead Consultant  
(type or print party name, title)

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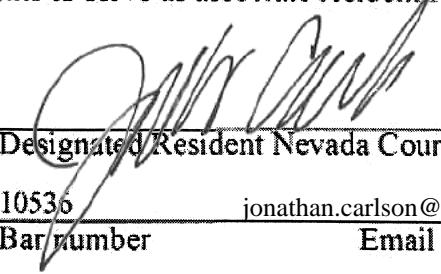
14 (party's signature)

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16 (type or print party name, title)

17 **CONSENT OF DESIGNEE**

18 The undersigned hereby consents to serve as associate resident Nevada counsel in this case.

19   
20 Designated Resident Nevada Counsel's signature

21 10536 jonathan.carlson@mccormickbarstow.com  
22 Bar number Email address

23 APPROVED:

24 Dated: this 22nd day of July, 20 25.

25   
26 UNITED STATES DISTRICT JUDGE

## **CALIFORNIA JURAT WITH AFFIANT STATEMENT**

GOVERNMENT CODE § 8202

See Attached Document (Notary to cross out lines 1–6 below)  
 See Statement Below (Lines 1–6 to be completed only by document signer[s], not Notary)

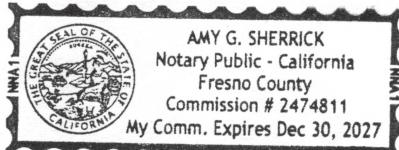
*Signature of Document Signer No. 1*

*Signature of Document Signer No. 2 (if any)*

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California  
County of FRESNO

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.



Seal  
Place Notary Seal Above

**OPTIONAL**

*Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.*

**Description of Attached Document**

**Title or Type of Document:** \_\_\_\_\_ **Document Date:** \_\_\_\_\_

Number of Pages: \_\_\_\_\_ Signer(s) Other Than Named Above: \_\_\_\_\_